



# HAZARDOUS MATERIALS DISCLOSURE

Chemical Inventory and Business Emergency Plan

File #

## PART III — Business Emergency Plan (BEP)

Please read instructions (on green page 6 ) prior to completing this Business Emergency Plan.

This form shall be typed or printed legibly in ink.

Keep a copy for your records and return the completed original forms, with Parts I and II, to:

Anaheim Fire Department  
Environmental Protection Section (EPS)  
201 S. Anaheim Bl., MS #300  
Anaheim, CA 92805-3858

Mark the correct box:

- ☐ This is the first time I have filed a BEP.
- ☒ A BEP is required to be reviewed every three years. I am submitting my BEP to meet this requirement.
- ☒ There have been changes in my business operation and/or personnel and I am submitting a new BEP with the corrected information.

Business Name		
ALLIED PACIFIC METAL STAMPING <del>division of Tower Industries, Inc.</del> <i>Inc.</i>		
Address		
2951 EAST LA PALMA AVENUE, ANAHEIM, CA 92806		
Business Owner		
TOWER INDUSTRIES, INC. / <del>TOM STULL</del> <i>(same as business name)</i> (sole shareholder)		
I certify under penalty of law that I have personally examined and am familiar with the information submitted and believe the submitted information is true, accurate, and complete.		
Print name of Owner/Operator	Signature	Date
TOM STULL	<i>Tom Stull</i>	2/12/02
Business Plan Prepared By	Signature	Date
JON SCHROEDER	<i>Jon Schroeder</i>	2/12/02

OFFICIAL USE ONLY:	Insp. #	Issued	Reviewed By	File #
Received	Correction Required			
<i>1/17/02</i>				



## UNIFIED PROGRAM CONSOLIDATED FORM

CITY OF ANAHEIM FIRE DEPARTMENT  
ENVIRONMENTAL PROTECTION SECTION  
201 S. ANAHEIM BOULEVARD, SUITE 300, ANAHEIM, CA 92805  
PHONE: (714) 765-4050 FAX: (714) 765-4608

## CONSOLIDATED CONTINGENCY PLAN

## SECTION I: BUSINESS PLAN AND CONTINGENCY PLAN

## I. FACILITY IDENTIFICATION

BUSINESS NAME / DBA: ALLIED PACIFIC METAL STAMPING <i>Inc.</i>		FACILITY ID #
SITE ADDRESS: 2951 E. LA PALMA AVE.	CITY: ANAHEIM	ZIP CODE: 92806

## II. EMERGENCY COORDINATOR

PRIMARY	ALTERNATE
NAME: JOHN WHITTAKER	NAME: MITCH CECIL /
TITLE / POSITION: PRESIDENT	TITLE: PRODUCTION MANAGER
BUSINESS PHONE: 714-630-8145	BUSINESS PHONE: 714-630-8145
24-HOUR PHONE: [REDACTED]	24-HOUR PHONE: [REDACTED]
PAGER #: -	PAGER #: -

## III. EMERGENCY RESPONSE PLANS AND PROCEDURES

## A. Notifications

Your business is required by State Law to provide an immediate verbal report of any release or threatened release of a hazardous material to local fire emergency response personnel, this Unified Program Agency (CUPA), and the Office of Emergency Services. If you have a release or threatened release of hazardous materials, immediately call:

FIRE/PARAMEDICS/POLICE/SHERIFF  
PHONE: 911

AFTER the local emergency response personnel are notified, you shall then notify this Unified Program Agency and the Office of Emergency Services.

Local Unified Program Agency: (714) 765-4050  
State Office of Emergency Service: (800) 852-7550 or (916) 845-8911  
National Response Center: (800) 424-8802

## Information to be provided during Notification:

- ❖ Your name and the telephone number from where you are calling.
- ❖ Exact address of the release or threatened release.
- ❖ Date, time, cause, and type of incident (e.g. fire, air release, spill, etc.)
- ❖ Material and quantity of the release, to the extent known.
- ❖ Current condition of the facility.
- ❖ Extent of injuries, if any.
- ❖ Possible hazards to public health and/ or the environment outside of the facility.

## B. Emergency Medical Facility

List the local emergency medical facility that will be used by your business in the event of an accident or injury caused by a release or threatened release of hazardous material.

HOSPITAL/CLINIC: MD MEDICAL CLINICS	PHONE NO: 714-630-6363	
ADDRESS: 1300 N. KRAEMER BLVD.	CITY: ANAHEIM	ZIP CODE: 92806



## HAZARDOUS MATERIALS DISCLOSURE

### Chemical Inventory and Business Emergency Plan

1. Your business is required by State Law to provide immediate notification of any release or threatened release of a hazardous material to 1) local fire emergency response personnel, 2) the Office of Emergency Services (OES), and 3) this Administering Agency. If you have a release or threatened release of hazardous materials, immediately call:

Fire/Paramedics/Police  
Phone: 911

Individual responsible for Calling 911:

MITCH CECIL

After the local emergency response personnel are notified, you shall then notify the Administering Agency (EPS) and the Office of Emergency Services (24 hours/day):

State Office of Emergency Services: (800) 852-7550  
or  
(916) 262-1621

AND:  
Local Administering Agency: (714) 765-4050

Individual responsible for calling this Administering Agency and the State OES:

JOHN WHITTAKER

2. List the local emergency medical facility that will be used by your business in the event of an accident or injury caused by a release or threatened release of hazardous materials.

Hospital/Clinic

Anaheim General Hospital

Fullerton/Placentia Medical  
640 So Placentia, CA 92870

Address

City

Zip Code

Phone Number

3350 W. Ball Road Anaheim CA 92804 (714) 827-6700

3. Does your business have a private on-site emergency response team? ☒ Yes ☐ No

If yes, describe what policies and procedures your business will follow to notify your on-site emergency response team in the event of a release or threatened release of hazardous materials. (Attach additional pages if necessary.)

Formal Emergency Evacuation Plan and a Emergency Action Plan  
copies of which are attached

State law requires your business to complete all sections of the Emergency Response Procedure listed below. "N/A" is not acceptable.

4. Briefly describe your business's standard operating procedures in the event of a release or threatened release of hazardous materials: Formal Emergency Evacuation Plan and Emergency Action Plan
- a. Prevention (prevent the hazard) — Describe the kinds of hazards associated with the materials present at your facility. What actions will your business take to prevent these hazards from occurring? Issues for discussion may include safety, storage, and containment procedures.

Formal Hazard Communication Program; Formal Injury and Illness Prevention Program; Formal Safety Rules in place and enforced

There are regularly scheduled meetings of employees and safety committee to review, communicate and update the formal plans

Minutes of the meetings are kept; copies of the plans are attached



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- b. Mitigation (reduce the hazard) — Describe what is done to lessen the harm or the damage to person(s), property, or the environment, and prevent what has occurred from getting worse or spreading. What is your immediate response to a spill, fire, explosion, or airborne release at your business?

Monthly meetings of safety committee; monthly meeting of employees to review and update haz matl communications and safety procedures; specific training for new employees;

Formal Emergency Action Plan, Evacuation Plan, Hazard Communication Program, Injury & Illness Prevention Plan are in place and copies are attached.

- c. Abatement (remove the hazard) — Describe what you would do to stop and remove the hazard. How do you handle the complete process of stopping a release, cleaning up, and disposing of released materials at your facility? What aspects of the response are beyond your ability, and need to be handled by others?

The formal plans and regular monthly meetings of safety committee and employees to discuss and communicate issues, improvements and updates of procedures and plans are in effect and have reduced injuries and exposure dramatically over last six years.

- d. Describe how you will immediately notify and evacuate your facility. What communications or alarms are used? How will you operate these during power failure? Also specify emergency exits, alternatives, and staging areas.

Alarms and speaker system in place and tested daily. Formal evacuation plan is in place and copy is attached. Monthly

meeting of employees after initial training in such procedures reinforces the plans.

- e. Your business is required by State Law to keep a copy of this Business Plan, including the chemical inventory and Site Map (Part II of the packet). Describe where copies will be located at your business. Where will other copies be maintained?

One copy is maintained in the Human Resource Administration office and one copy of all materials at corporate hq office.

11/7/08